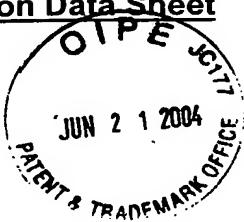


Supplemental Application Data Sheet



**Application Information**

**Application Serial No::** 10/774,415  
**Application Filing Date::** 02/10/2004  
**Application Type::** Continuation  
**Subject Matter::** Utility  
**Suggested classification::**  
**Suggested Group Art Unit::**  
**CD-ROM or CD-R?::** None  
**Computer Readable Form (CRF)?::** No  
**Title::** PRODRUGS OF 3-(PYRROL-2-YLMETHYLIDENE)-2-INDOLINONE DERIVATIVES  
**Attorney Docket Number::** 034536-0919  
**Request for Early Publication?::** No  
**Request for Non-Publication?::** No  
**Suggested Drawing Figure::** N/A  
**Total Drawing Sheets::** 0  
**Small Entity?::** No  
**Petition included?::** No  
**Secrecy Order in Parent Appl.?::** No

**Applicant Information**

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Malcolm Wilson  
**Family Name::** MOON  
**City of Residence::** Kalamazoo

**State or Province of Residence::** MI  
**Country of Residence::** US  
**Street of mailing address::** 3750 Rosemere Street  
**City of mailing address::** Kalamazoo  
**State or Province of mailing address::** MI  
**Postal or Zip Code of mailing address::** 49004

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Walter  
**Family Name::** MOROZOWICH  
**City of Residence::** Kalamazoo  
**State or Province of Residence::** MI  
**Country of Residence::** US  
**Street of mailing address::** 5300 Chicadee  
**City of mailing address::** Kalamazoo  
**State or Province of mailing address::** MI  
**Postal or Zip Code of mailing address::** 49004

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** People's Republic of China  
**Status::** Full Capacity  
**Given Name::** Ping  
**Family Name::** GAO  
**City of Residence::** Portage  
**State or Province of Residence::** MI

**Country of Residence::** US  
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**City of mailing address::** Portage  
**State or Province of mailing address::** MI  
**Postal or Zip Code of mailing address::** 49024

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
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**Family Name::** KOENIG  
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**State or Province of Residence::** CA  
**Country of Residence::** US  
**Street of mailing address::** 821 El Camino Real, #206  
**City of mailing address::** Burlingame  
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**Postal or Zip Code of mailing address::** 94020

#### **Correspondence Information**

**Correspondence Customer Number::** 22428  
**E-Mail address::** PTOMailWashington@Foley.com

#### **Representative Information**

<b>Representative Customer Number::</b>	30543	
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### Domestic Priority Information

<u>Application::</u>	<u>Continuity Type::</u>	<u>Parent Application::</u>	<u>Parent Filing Date::</u>
This Application	Continuation of	<u>10/243,942 (USP 6,716,870)</u>	09/16/2002
<u>10/243,942 (USP 6,716,870)</u>	Division of	<u>09/863,819 (USP 6,482,848)</u>	05/24/2001
<u>09/683,819 (USP 6,482,848)</u>	An application claiming the benefit under 35 USC 119(e)	60/207,000	05/24/2000
09/683,819	An application claiming the benefit under 35 USC 119(e)	60/225,045	08/11/2000

### **Foreign Priority Information**

<b>Country::</b>	<b>Application number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>

### **Assignee Information**

**Assignee name::** Sugen, Inc. and Pharmacia & Upjohn Company